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WHAT SHOULD A DOCTOR BE PAID?

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(RETIRED LIST).

THE chivalric theory that lawyers, clergymen, and physicians are bound to render their services to those who are afflicted either in their estates, their souls, or their bodies without fee and without reward, and that whatever pecuniary recompense is made is tendered and received under the thin disguise of being an *honorarium*, has long since gone the way of many other chivalric ideas. The lawyer takes his "retainer," his "refresher," and his final fee as a matter of course, and, as a rule, gauges each demand in accordance with his ideas of the value of his services and of the means of his client. The clergyman of every religion receives the Sunday collection, or the pew rents, or the tithes, or a fixed stipend as the case may be, and other things being equal, and if he is free to do so by the laws of his church, goes to that parish that pays him the largest sum of money. He even, in these latter days, sometimes expects a fee for the burial of the dead, always for the performance of a marriage, and not infrequently for receiving a soul burdened with original sin into the fold of the church.

All this is very well, and, as a rule, people do not grumble; but the physician, whose labors are more onerous than those either of the clergyman or the lawyer, whose services are of such a confidential and personal nature that mere money is a most inadequate return, is generally (and I use the word "generally" advisedly) paid grudgingly, and often his modest account is cut down by the false plea of poverty to a sum that nothing but the consciousness that he must either take that or go without causes him to receive. I have known people in comfortable and even in

affluent circumstances put on their shabbiest clothes and assume their most melancholy expression for the purpose of advancing the plea of being in limited means, when they made a professional visit to a physician ; and when they had profited by the disgraceful subterfuge, brag to their friends of their success in " beating " the doctor. I know of a man whose wealth, at a moderate estimate, is twenty-five millions of dollars, who gives over ten thousand a year to his church, and twenty-five thousand to his lawyers (sometimes much more than this), who fares sumptuously every day ; and yet, who when called upon to pay his physician, lays the notes on the table, still keeping his fingers on them, and in the course of conversation puts them back into his pocket, and again lays them on the table with lingering hands and finally watches them with avaricious eyes as he backs himself out of the consulting-room. I have known another whose child had been saved from death by diphtheria, by the constant care of the physician day and night, and who, when a modest pecuniary claim was made, sent the note back with a demand for the items, and then, when the physician indignantly recalled his memorandum and made him a present of the amount charged, accepted the gift, and changed his physician for a lower priced man. And yet this individual (it would be a libel on the race to call him a man) was receiving an income of over fifty thousand dollars a year, and lifted up his voice every Sunday before one of the highest priced preachers in the city of New York.

Undoubtedly a considerable amount of this tendency in the laity to place a low estimate on the services of physicians is due to their self-depreciation, and to the depreciation of their brethren in which many members of the profession indulge. This is shown in their disposition to render important medical services for very small fees, or for nothing at all, especially when some public institution is concerned, or some so-called charity with ample funds to pay good salaries to their whole staff except the medical portion. In the city of New York, for instance, the Commissioners of Charities and Correction receive four or five thousand dollars a year each, but the physicians, without whose aid they could not carry on their establishment a single day, are expected to give their time and knowledge to the wealthy city without any other reward than the slight increase of reputation which hospital ap-

pointments are supposed to give. And so with the hundreds of dispensaries, the medical appointments to which are sought after with avidity mainly for the advantages they are expected to confer in attracting paying practices, and to some extent undoubtedly for the experience which they afford to those who, if they waited for patients with fees in their pockets, would be a long time in acquiring a practical knowledge of very simple professional details.

Now, there is no proper reason why such advantages should not be merely incidental, as in every other profession, and why the physician, young or old, should not be properly paid for the services he renders to the poor of the city or State. Nobody else gives them anything for nothing; their fuel, their food, their clothing, their medicines, even their religion, are paid for by the public. As to the legal services which are rendered, I venture to say that not ten physicians out of every hundred receive as much compensation as do the corporation attorneys and the other lawyers employed by the city of New York.

A united effort on the part of the medical profession would very soon change all this. Such an effort is, however, outside of the range of possibility. For there will always be found some who, placing a low estimate on the value of their own services, will rush in to secure the places which those of a higher grade resign.

No one questions the fact that saving a man's life is ordinarily a matter of more importance to him than winning a lawsuit involving a million, or even twenty million, dollars; and yet the lawyers in the one case would doubtless receive many thousands of dollars, perhaps running up into the millions; while the physician in the other would be considered exorbitant in his demands if he placed the pecuniary value of his services at a paltry fraction of the sum cheerfully given to the legal advisers.

The tourist captured by Sicilian brigands does not hesitate to give twenty thousand dollars under the threat that failure to do so will surely result in the amputation of his nose. He would give ten times as much, if he had it, to save himself from so horrible a mutilation. But should a surgeon, by a skilful operation, preserve the same organ of the same tourist from the destructive influence of injury or disease, the probability is that, should he fix his monetary compensation at so large a sum as five hundred

dollars, he would be regarded as almost as much of a robber as the Sicilian brigands, and that even many of his fellow-practitioners would look at him with that degree of envy which the obtaining of such a fee would be likely to excite.

To be sure, in the one case there is no alternative. If the money is not promptly paid, the nose goes; while in the other there are many surgeons who will gladly do all in their power to save the threatened proboscis for a much less sum than five hundred dollars. The patient knows this, and therefore he rebels; but few will question the assertion that if he is able (and on this point hangs much of the ethics of medical fees) he should pay the surgeon who saves his nose by skill and kindness at least as much as he gives the man who proposes to cruelly deprive him of it. From the earliest times the rich have paid, as was eminently proper, more than the poor for medical services. Thus John of Gadsden, an English medical practitioner of distinction who flourished in the thirteenth century, required his disciples to follow his example, and to charge the rich twice as much as they demanded of the poor. It is only necessary to refer to the various histories of medicine to discover that several hundred years ago physicians and surgeons were compensated to an extent that would even in this extravagant age be regarded as princely.

That the medical man should make his fees bear some relation to the means of his patient is a matter that seems eminently just and proper. Physicians do a great deal of work for which they receive very little money, and more still for which they get nothing at all. For this the rich should in part pay; it is unjust that the physician alone should bear the brunt. The value of medical services is always great, and it is only the rich who can properly compensate the physician who renders them. When the same services are given to a poor person, it is impossible that they can be adequately rewarded, and hence smaller fees are cheerfully received. It is really not that the rich are charged more, but that the poor are charged less. It would seem right that medical fees should be arranged upon the basis of the patient being worth a certain amount (say a hundred thousand dollars), and that the *honorarium*, if we choose to use that term, should be adjusted accordingly, being more or less as the wealth of the patient was greater or less than the sum fixed upon.

Take for instance a case like the following. A gentleman rated as two or three times a millionaire is suffering from a spinal affection, slowly but surely advancing towards a fatal termination. Several skilful neurologists pronounce the disease to be *locomotor ataxia* and hold out no hope of an arrest of the morbid process. Indeed the consensus of opinion limits the duration of his life to, at the most, five years of suffering, the last two or three of which it is quite certain will be marked by inability to walk or even to stand without assistance. All this is in accordance with the experience gained by extensive practical knowledge of the disease in question and of its uniformly fatal termination. In despair of receiving any benefit, but to oblige his friends who are not willing to give up all hope, he consults another physician. Examination shows that the diagnosis is correct and that the prospect of recovery is *almost* nothing. "Almost" for this physician is of a hopeful temperament, one who is not willing to give up while there is a ghost of a chance of saving life, and one, moreover, who knows his business, who possesses unbounded courage, who is not afraid of responsibility, who is fertile of resources, and who understands that kind of scientific experimentation which only a thorough acquaintance with medicines, with the forces of nature, and with the constitution of his patient can justify him in bringing into use in the case of a human being. In the course of a few months the progress of the disease is arrested, the atrocious pains cease, the gait becomes steady, and the many accompanying morbid phenomena either disappear entirely or are so mitigated in violence as to be no longer a source of suffering. Ten, fifteen years pass, and the man is to all appearances in good health. He goes about the crowded streets of a city, walking in the course of a day several miles without assistance or suffering from undue fatigue. He attends dinner parties and eats and drinks like the other guests, he carries on an extensive business, and adds year by year to his wealth. Life is full of charms to him, and he bids fair to enjoy it for a score more of years. How should such a man recompense the physician who has done all this for him? Are the paltry five or ten dollar fees for each visit a sufficient pecuniary reward, amounting as they do perhaps to no more than a beggarly thousand dollars or so? Would five hundred thousand dollars be too large an amount for him to pay? And is it not quite certain that to the lawyer who should guarantee

to save him from the loss of his three millions in a desperate lawsuit he would give that, or even more than that sum?

Or, suppose that the physician had in the beginning addressed the patient something after this manner:

"You have asked me to tell you the truth as I understand it. Well, you are affected with one of the most intractable diseases known to medical science. Your physicians have made a correct diagnosis, and have treated you with skill and in accordance with the most advanced ideas of those who have given exclusive attention to such affections. I do not say that I can cure you; on the contrary, the probability is that nothing I can do will be of any material service to you. But there is just a glimmering of a hope that I can, at any rate, arrest the further progress of your disease and prolong your life in comparative comfort for at least ten years. Now I am willing to try, on consideration that if I succeed you shall give me a fee of half a million dollars. If I fail you shall pay nothing. I have a plan of treatment which I have published in medical journals, brought before medical societies, and described in detail before my classes in medical colleges. But the profession accepts new ideas slowly, and many of its members, as they have done in former days, and as is now constantly done with greater men than I, abuse me in unmeasured terms as a visionary and an empiric (as if we were not all empirics, and as if the best physician is not the best empiric). I propose to try this system of treatment. I may not succeed, but at any rate you will be no worse than you are now, and if under its use your disease is cured or arrested in its progress, you shall give me one-sixth of your fortune."

Of course physicians do not talk in this manner to their patients, but lawyers and business men frequently act in strict accordance with such a proposal, and their clients and co-operators agree to its provisions without hesitation.

It is safe to say that no man suffering with such a disease as the one I have mentioned and reposing confidence in the physician and possessing the ability to meet the obligation, would reject the proposal.

Now take an actual case such as the following:

A gentleman of great wealth, while returning from a convivial gathering at which he had imbibed too much champagne, fell and struck his head against the curbstone. He was taken up by the friends who were with him and carried in a carriage to his own residence. Although not comatose at first, stupor gradually supervened, so that by the time he arrived home he was profoundly insensible. His family physician was called, and after making a thorough examination could find no evidence of a fracture of the skull. He gave the opinion that a blood-vessel had been ruptured, but he did not know enough to locate the exact

place of injury, nor did such acquaintance with the science and art of surgery as he possessed enable him to obtain a clear idea of what had happened within the man's skull. Another physician who was called in and who was supposed to be well up in his profession was equally helpless. Both united in the opinion that there was no hope, and that there was nothing to be done but to wait for death to end the scene. Then at a fortunate moment a son who was a student of medicine begged that a young surgeon, a friend of his, might be called in consultation. The two older medical men objected on the ground that he was so greatly their junior that it would be beneath their dignity to refer to him for advice; but the youth, who knew of his friend's ability and of his work in the clinics and hospitals, urged so piteously that his petition might be granted that his mother consented; the respectable professional gentlemen withdrew from what they considered to be a hopeless case; and the young doctor, the ink on whose diploma was scarcely dry, was summoned. The history of the case was given him, examination showed that the right side of the skull had been struck, and that there was paralysis of the left arm. The patient was by this time in a state of deep stupor. The diagnosis was made that meningeal hemorrhage (rupture of a blood vessel in the membranes of the brain) had been produced, and that blood had been effused between the brain and the skull and was pressing on the organ. Death was inevitable unless relief were promptly afforded. There was no hesitation. The trephine was at once applied at the place where his knowledge of anatomy and physiology showed him the clot must be, and there it was, the blood pouring out from a small artery that had been ruptured. The surface of the brain was cleaned, the bleeding vessel tied and almost in an instant the patient regained consciousness and the power of motion. Complete recovery quickly followed.

Now, what should have been this young man's fee? If ever a human life has been saved, this man saved one. His patient was worth, at the lowest estimate, half a million dollars; one-fifth of that sum would have been reasonable, and yet, when the modest claim of five hundred dollars was made, it was rejected as exorbitant, and, as the doctor was poor, he took two hundred and fifty rather than contend for what he thought was right, but

which, under the circumstances, was a preposterously, almost criminally, low charge.

Such cases as these disclose another element that should be taken into consideration by medical men in regulating their fees.

It is manifestly unjust that there should be a uniform rate of fees applicable to all medical men, regardless of the skill and experience of the practitioner. There are many inside the profession who would have a level grade for all, just as do the trades unions, which prohibit a competent bricklayer from laying more bricks in a day than can be laid by an inferior workman. But superior science and ability should count largely in the medical profession in the matter of fees, and to a certain degree they do, but to nothing like the extent that should prevail. They are the strongest kind of factors with lawyers, and they should be still more powerful with doctors. Boldness, originality, knowledge, tact, and above all, that peculiar power which enables the physician to comprehend almost at a glance the nature of the case with which he has to deal, should be high-priced to those who have the ability to pay.

Finally, it must be borne in mind that no matter how much the medical man may receive in fees in the course of a year, the work that he does for nothing would, even if moderately paid for, reach a sum far in excess of the pecuniary remuneration from his well-to-do or wealthy patients. No class of men do so much in the way of charity as those who practice medicine. It is time that superior skill in them and wealth in their patients should count for more than has hitherto been the case, and their fees should be promptly paid. Gratitude is an evanescent emotion; and the medical account presented months after the service has been rendered is too often regarded like the bill for a dinner eaten long ago.

W. A. HAMMOND.